

# Consent to Engage with Social Service Agency

Date: [Insert Date]

To Whom It May Concern,

I, [Your Full Name], hereby give my consent to engage with [Name of Social Service Agency]. I understand that the agency will provide support and services related to [briefly describe the nature of the services].

I acknowledge that I have been informed of my rights regarding confidentiality and the nature of the services provided. I am aware that I can withdraw my consent at any time.

By signing below, I confirm that I understand the terms of this consent and agree to participate in the services offered by [Name of Agency].

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Contact Information]